PREVENTING, RECOGNISING AND RESPONDING TO INFECTIONS

Infection prevention and control (IPC) is a responsibility for all health care assistants working in aged residential care. Older adults are particularly vulnerable to infections due to age-related changes in immunity, chronic health conditions and close living environments. Effective IPC requires adhering to policies, vigilance, consistency and clear communication.

Alert

Identify and alert suspected infection:

- Report any signs of infection (eg, fever, cough, vomiting, diarrhoea, skin redness/warmth, swelling, eye or wound discharge) to registered nurse/clinical nurse manager
- Refer to Acute Deterioration Care Guide

Follow facility infection control policy and procedures

*PPE = Personal protective equipment

Consider immediate actions:

- Isolate affected individuals
  - Use appropriate PPE* (eg, gloves, masks, gowns, eye protection)
  - Perform hand hygiene before and after contact with resident or their surroundings and after PPE removal
  - Cohort or place resident in single room
- Perform hand and environmental hygiene
  - Clean hands frequently
  - Clean and disinfect high-touch surfaces
- Activate outbreak management plan
  - Notify clinical manager to determine if outbreak protocols should be activated.

OBSERVE

Observe residents' general condition

- Look for changes in mobility, appetite, hydration, mood or responsiveness.
- Look for signs of acute deterioration - see Acute Deterioration Guide
- Watch for new or worsening signs of discomfort, confusion or agitation that may indicate underlying infection

Observe for physical signs of infection

- Fever or chills
- Coughing, sneezing or shortness of breath
- Redness, swelling, warmth, or discharge from wounds or eyes
- Changes in urine colour, smell or frequency
- Gastrointestinal symptoms such as vomiting or diarrhoea

Observe the environment

- Check that shared spaces are clean, clutter-free and well-ventilated
- Ensure that cleaning schedules are followed and that high-touch surfaces are disinfected regularly during infectious episode

Observe infection prevention and control practices

- Watch for proper hand hygiene among staff, residents and visitors. Provide a gentle reminder to perform hand hygiene to others as needed
- Ensure PPE is used correctly and consistently
- Notice any lapses in safe food handling, waste disposal or laundry procedures

Observe equipment and supplies

- Confirm that reusable equipment is cleaned between uses
- Ensure that supplies such as gloves, masks, hand sanitisers and continence products are stocked and accessible

IDENTIFY

Early warning signs

- Sudden or unexplained changes in behaviour, such as increased confusion, may signal infection in older adults
- A resident who becomes unusually tired or withdrawn may be developing an illness

Infection risks

- Breaks in skin integrity (eg, pressure injuries, cuts, rashes)
- Poor hygiene or inability to perform personal care
- New urinary and faecal incontinence
- Contaminated surfaces or equipment
- Poor food safety, laundry practices or waste disposal

Patterns or clusters

- Multiple residents showing similar symptoms may indicate an outbreak
- Increased coughing or gastrointestinal symptoms should be escalated immediately

(See *Acute Deterioration Guide and Delirium Care Guide*)

REPORT

Report changes in resident's condition promptly

- Notify registered nurse of any changes in resident condition
- Use clear language: describe what you saw, heard or measured
- Include vital signs if available (temperature, pulse, blood pressure, respirations, oxygen saturation)

Report suspected infections immediately

- Even mild symptoms can escalate quickly in older adults
- Early reporting allows for timely assessment by a registered nurse or clinical leader

Report environmental or procedural risks

- Broken or dirty equipment
- Inadequate cleaning supplies
- Overflowing waste bins
- PPE shortages

Report exposure incidents

- Needlestick injuries
- Contact with blood or bodily fluids
- Breaches in PPE during care of an infectious resident

Follow facility reporting pathways

- Know who your first point of contact is (registered nurse, clinical manager)
- Use incident reporting systems as required
- Document verbal reports when policy requires written follow-up

ACTION

Perform the 5 moments of hand hygiene consistently

- Before and after resident contact
- After removing gloves
- After handling bodily fluids
- Before food handling
- After touching contaminated surfaces

Use PPE correctly

- Select PPE appropriate for the task (gloves, masks, gowns, eye protection)
- Put on and remove PPE in the correct order to avoid contamination
- Dispose of PPE safely and immediately after use

Support resident hygiene

- Assist with bathing, oral care, toileting, grooming
- Encourage hand hygiene before meals and after toileting
- Ensure clean clothing and bedding

Maintain a clean and safe environment

- Clean spills promptly
- Clean high-touch surfaces such as bed rails, call bells and mobility aids
- Follow facility cleaning policies and schedules
- Ensure proper waste separation and disposal

Follow isolation or cohorting procedures

- Follow the signs and instructions on isolation precautions for residents
- Limit movement of residents with suspected or confirmed infections
- Avoid sharing equipment unless it is fully cleaned and disinfected

Take immediate action during outbreaks

- Follow outbreak protocols, including increased cleaning and PPE use
- Support visitor restrictions or screening procedures
- Reinforce hand hygiene and symptom monitoring

RECORD

Record observations clearly

- Document in progress notes and update care plan
- Include time, date and any actions taken

Record symptoms and changes promptly

- Note onset, duration and severity of symptoms
- Record vital signs
- Document any interventions (eg, fluids offered, wound care provided)

Record infection control measures

- Isolation status
- PPE requirements
- Cleaning or disinfection tasks completed
- Any deviations from normal routines due to infection risk

Record incidents and exposures

- Complete incident forms as required
- Document who was notified and when
- Include follow-up actions or monitoring requirements